Strengthening of health infrastructure

2666. SHRI SANTOSH BAGRODIA:
SHRI GIREESH KUMAR SANGHI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Institute of Communicable Diseases has been monitoring the recurring incidents of communicable diseases in various parts of the country;

(b) if so, the details of the protocol followed by the Institute of Communicable Diseases and other agencies for nation-wide surveillance of communicable diseases;

(c) the findings of such surveillance thereof;

(d) how many incidences of recurrence of communicable diseases have been reported in past five years and details thereof, region-wise and year-wise; and

(e) what steps are being taken to strengthen the district level health infrastructure to contain and prevent such communicable diseases?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) No. Sir. Recurring incidents of communicable diseases in various parts of the country are monitored by respective health programmes such as TB, Malaria, HIV/AIDS, Leprosy etc. The National Institute of Communicable Disease (NICD) has been monitoring the incidence of epidemic-prone communicable diseases in different parts of the country augmented through the Integrated Diseases Surveillance Project (IDSP). This project was launched in November, 2004. It seeks to setup a decentralized State and district based surveillance system in the country. The project is being implemented across the country in three phases. At present 23 States of Phase-I & Phase-II are in various stages of implementation.

The components of projects are (i) integrating disease surveillance at the State and district level; (ii) coordinate and decentralize surveillance activities; (iii) training stakeholders in disease surveillance and response, improving laboratory support; and (iv) IT networking and strengthening data

quality, analysis and links to action for a limited number of targeted diseases under IDSP.

IDSP States are still in various phases of establishing their surveillance systems and the Data inflow is at initial stage. When IDSP is fully implemented, it is expected to detect early warning signals of impending outbreaks and help initiate an effective and timely response.

To strengthen the district level surveillance system IDSP is imparting training to stake holders in disease surveillance and response; establishing IT network for information flow and strengthening laboratories for surveillance of communicable diseases.

Outbreak of communicable diseases investigated by NICD in the last five years is enclosed as annexure [*See* Appendix 209 Annexure No. 8].

Skull Picture on Beedi Bundles

2667. SHRI GIREESH KUMAR SANGHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Act directing printing of a skull picture on beedi bundles has caused resentment among beedi manufacturers and workers;

(b) whether Government or any independent agency has conducted a study to find out its impact on the beedi sales;

(c) if so, the details thereof;

(d) whether Government have received any representation either to repeal the Act or to reduce the size of the skull picture on the beedi bundles; and

(e) if so, what remedial measures are being taken to remove the shortcoming, if any, in the Act?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (e) The bidi industry has voiced its concern on the Cigarettes and other Tobacco Products (Packaging and Labelling), Rules, 2006 relating to specified warnings. They have represented stating that the requirement of printing of pictorial warning on the packages of bidis are not required as the